

11-4-04

IFD



Old Attorney Docket No. MJA-27202/03
New Attorney Docket No. HTEC-014/01US

PATENT

Express Mail Label Number: EV 459984932 US

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By: Deborah Hager

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of Ross, et al.

Serial No.: 10/631,304 Examiner: Patricia C. Mallari

Confirmation No.: 3744 Art Unit: 3736

Filed: July 31, 2003

For: **RESPIRATORY ANALYZER FOR EXERCISE USE**

Mail Stop Non-Fee Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL OF RESPONSE

Enclosed are the following documents in response to the office action mailed October 15, 2004, for the above-identified application:

- Response to Restriction Requirement
- Petition for Extension of Time
- Request for Approval of Drawing Changes
- Information Disclosure Statement
- Notice of Appeal
- Associate Power
- Revocation and New Power
- Change of Address
- Return receipt postcard
- Check No. ____ in the amount of \$ ____ for the total fee as calculated below
- Other:

The fee has been calculated as follows:

| | NO. OF CLAIMS | | EXTRA CLAIMS | RATE | FEE |
|---|---------------|--------|--------------|-----------|----------------|
| Total Claims | | - 20 = | | x \$18.00 | \$ 0.00 |
| Independent Claims | | - 3 = | | x \$84.00 | \$ 0.00 |
| If multiple dependent claims are presented, add \$280.00 | | | | | |
| Total Amendment Fee | | | | | \$ 0.00 |
| If small entity status is applicable, subtract 50% of Total Amendment Fee | | | | | |
| Other fees: (specify) | | | | | |
| TOTAL FEE DUE | | | | | \$ 0.00 |

A check for the total fee is attached.

Please charge \$ to Deposit Account No. 50-1283 for the total fee. This paper is being submitted in duplicate.

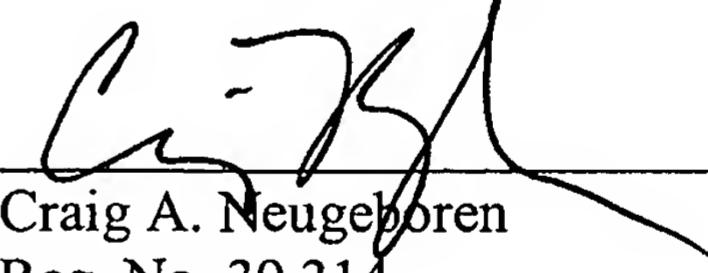
The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-1283.

Dated: November 3, 2004

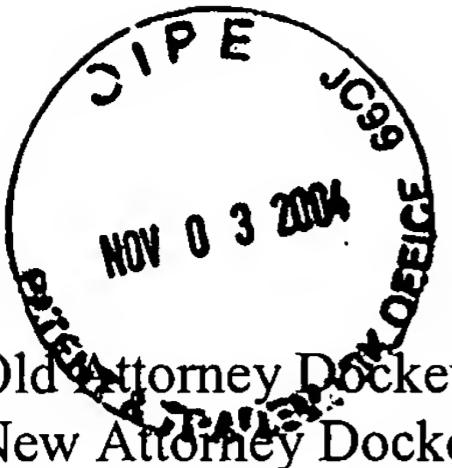
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Respectfully submitted,
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RESPONSE TO RESTRICTION REQUIREMENT

In the restriction requirement mailed October 15, 2004, the Examiner requested that the Applicants elect among the following groups of claims:

Group I: Claims 1-24 drawn to a respiratory analyzer for determining a respiratory parameter of a subject, classified in class 600, subclass 529; and

Group II: Claims 25-28, drawn to a method of determining a resting metabolic rate or activity energy expenditure of a subject, classified in class 600, subclass 531.

Applicants hereby elect, without traverse, Group I, which includes Claims 1 - 24, for prosecution on the merits.

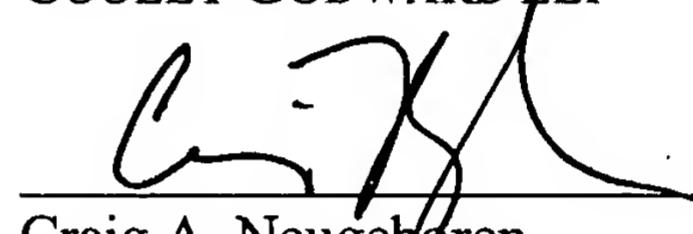
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